PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

STO-103-CIP-CON

CLAIMS AS FILED - PART I (Column 1)						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			191				RA	ΤE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASI	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			19 minus 20=		* Ø		X\$	9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 mi	nus 3 =	* Ø		X4	2=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PR			RESENT								. 200	
* If the difference in column 1 is I			less than zero enter "0" i			olumn 2	+14		75.6	OR	+280=	
"				•		Olditiit L	TO	AL	375	OR	TOTAL	
	CI	(Column 1)	MENDED - PART II (Column 2			(Column 3)	SM	ALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS . REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER. DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18≃	
	Independent	*	Minus	***		=	X4	2=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		+14				+280≈	
								O= OTAL		OR	TOTAL	
							ADDIT		L	OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)			ADDI			4001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RA	TE -	addi- Tional- Fee	_	RATE	ADDI- -TIONAL- FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	2=		OR	X84=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM				,			-
							+14	0= OTAL		OR	+280=	
							ADDIT			OR	TOTAL ADDIT. FEE	<u> </u>
_		(Column 1)		(Colu		(Column 3)	7		÷			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	 2=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		~~			OR		
	16 Mars - 2011 - 1				- #0" :	L 0	+14	0=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE ADDIT. FEE												
		imber Previously P nber Previously Pa							propriate bo	x in co	olumn 1.	